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BEFORE THE
MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA

In the Matter of the Accusation Against:

Robert Paul Zgliniec, M.D.
12913 Avenida La Valencia
Poway, CA 92064

Physician's and Surgeon's Certificate
No. C 35020,

Respondent.

Case No. 800-2017-030726

A C C U S A T I O N

PARTIES

1. Kimberly Kirchmeyer (Complainant) brings this Accusation solely in her official capacity as the Executive Director of the Medical Board of California, Department of Consumer Affairs (Board).

2. On or about May 7, 1973, the Medical Board issued Physician's and Surgeon's Certificate No. C 35020 to Robert Paul Zgliniec, M.D. (Respondent). The Physician's and Surgeon's Certificate was in full force and effect at all times relevant to the charges brought herein and will expire on June 30, 2020, unless renewed.

JURISDICTION

3. This Accusation is brought before the Board, under the authority of the following laws. All section references are to the Business and Professions Code (Code) unless otherwise indicated.

4. Section 2227 of the Code states:

“(a) A licensee whose matter has been heard by an administrative law judge of the Medical Quality Hearing Panel as designated in Section 11371 of the Government Code, or whose default has been entered, and who is found guilty, or who has entered into a stipulation for disciplinary action with the board, may, in accordance with the provisions of this chapter:

“(1) Have his or her license revoked upon order of the board.

“(2) Have his or her right to practice suspended for a period not to exceed one year upon order of the board.

“(3) Be placed on probation and be required to pay the costs of probation monitoring upon order of the board.

“(4) Be publicly reprimanded by the board. The public reprimand may include a requirement that the licensee complete relevant educational courses approved by the board.

“(5) Have any other action taken in relation to discipline as part of an order of probation, as the board or an administrative law judge may deem proper.

“(b) Any matter heard pursuant to subdivision (a), except for warning letters, medical review or advisory conferences, professional competency examinations, continuing education activities, and cost reimbursement associated therewith that are agreed to with the board and successfully completed by the licensee, or other matters made confidential or privileged by existing law, is deemed public, and shall be made available to the public by the board pursuant to Section 803.1.”

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1 5. Section 2234 of the Code, states:

2 “The board shall take action against any licensee who is charged with
3 unprofessional conduct. In addition to other provisions of this article, unprofessional
4 conduct includes, but is not limited to, the following:

5 “... .

6 “(b) Gross negligence.

7 “(c) Repeated negligent acts. To be repeated, there must be two or more
8 negligent acts or omissions. An initial negligent act or omission followed by a
9 separate and distinct departure from the applicable standard of care shall constitute
10 repeated negligent acts.

11 “(1) An initial negligent diagnosis followed by an act or omission medically
12 appropriate for that negligent diagnosis of the patient shall constitute a single
13 negligent act.

14 “(2) When the standard of care requires a change in the diagnosis, act, or
15 omission that constitutes the negligent act described in paragraph (1), including, but
16 not limited to, a reevaluation of the diagnosis or a change in treatment, and the
17 licensee’s conduct departs from the applicable standard of care, each departure
18 constitutes a separate and distinct breach of the standard of care.

19 “... .”

20 6. Section 2266 of the Code states:

21 “The failure of a physician and surgeon to maintain adequate and accurate records
22 relating to the provision of services to their patients constitutes unprofessional conduct.”

23 7. Unprofessional conduct under Business and Professions Code section 2234 is
24 conduct which breaches the rules or ethical code of the medical profession, or conduct
25 which is unbecoming a member in good standing of the medical profession, and which
26 demonstrates an unfitness to practice medicine. (*Shea v. Board of Medical Examiners*
27 (1978) 81 Cal.App.3d 564, 575.)

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1 **FIRST CAUSE FOR DISCIPLINE**

2 **(Gross Negligence)**

3 8. Respondent has subjected his Physician's and Surgeon's Certificate No.
4 C 35020 to disciplinary action under sections 2227 and 2234, as defined by section 2234,
5 subdivision (b), of the Code, in that he committed gross negligence in his care and
6 treatment of Patient A,¹ as more particularly alleged hereinafter:

7 **Patient A**

8 9. Patient A first presented to Respondent in or around August 2009,² after having
9 been incarcerated and having stayed at a psychiatric hospital in El Cajon, California.

10 10. Patient A's prior medical history included, but was not limited to, hearing
11 impairment, chronic back pain with L5 radiculopathy,³ lumbar surgery, 13 reported
12 surgeries and a motor vehicle accident, left knee replacement, ORIF⁴ at the left
13 acetabulum⁵ posteriorly, tobacco use, depression, hypertension,⁶ dyslipidemia,⁷ BPH⁸
14 without obstruction, right plantar fasciitis⁹ and an infected dog bite on his right forearm.

15 _____
16 ¹ References to Patient A are used to protect patient privacy.

17 ² Conduct occurring more than seven (7) years from the filing date of this
18 Accusation is for informational purposes only and is not alleged as a basis for disciplinary
19 action.

20 ³ Radiculopathy refers to a disease of the root of a nerve, such as from a pinched
21 nerve or a tumor.

22 ⁴ ORIF (open reduction and internal fixation) is a type of surgery used to fix broken
23 bones.

24 ⁵ Acetabulum is the deep, cup-shaped structure that encloses the head of the femur
25 at the hip joint.

26 ⁶ Hypertension refers to high blood pressure.

27 ⁷ Dyslipidemia refers to abnormally elevated cholesterol or fats (lipids) in the
28 blood.

⁸ BPH (benign prostatic hyperplasia) refers to a common, non-cancerous
enlargement of the prostate gland.

⁹ Fasciitis is an inflammation of the fascia, which is the connective tissue
surrounding muscles, blood vessels and nerves.

1 11. Between on or about July 20, 2012 through on or about January 25,
2 2016, Respondent prescribed various controlled substances to Patient A, including,
3 but not limited to morphine sulfate,¹⁰ temazepam,¹¹ and oxycodone hcl-
4 acetaminophen.¹²

5 12. Patient A had a history of "misplaced" pain medications. On multiple
6 occasions, Patient A made "early refill" requests. During the time Respondent
7 prescribed controlled substances to Patient A, noted above, Respondent failed to
8 utilize and/or failed to document having utilized random urine toxicology tests.

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12 ¹⁰ MS Contin® (morphine sulfate), an opioid analgesic, is a Schedule II controlled
13 substance pursuant to Health and Safety Code section 11055, subdivision (e), and a
14 dangerous drug pursuant to Business and Professions Code section 4022. When properly
15 prescribed and indicated, it is used for the management of pain that is severe enough to
16 require daily, around-the-clock, long-term opioid treatment and for which alternative
17 treatment options are inadequate. The Drug Enforcement Administration has identified
18 oxycodone, as a drug of abuse. (Drugs of Abuse, A DEA Resource Guide (2011 Edition),
19 at p. 39.) The Federal Drug Administration has issued a black box warning for MS
20 Contin® which warns about, among other things, addiction, abuse and misuse, and the
21 possibility of life-threatening respiratory distress. The warning also cautions about the
22 risks associated with concomitant use of MS Contin® with benzodiazepines or other
23 central nervous system (CNS) depressants.

24 ¹¹ Restoril® (temazepam), a benzodiazepine, is a centrally acting hypnotic-sedative
25 that is a Schedule IV controlled substance pursuant to Health and Safety Code section
26 11057, subdivision (d), and a dangerous drug pursuant to Business and Professions Code
27 section 4022. When properly prescribed and indicated, it is used to treat seizure disorders
28 and panic disorders. Concomitant use of Restoril® with opioids "may result in profound
sedation, respiratory depression, coma, and death." The Drug Enforcement Administration
(DEA) has identified benzodiazepines, such as Restoril®, as drug of abuse. (Drugs of
Abuse, DEA Resource Guide (2011 Edition), at p. 53.)

¹² Percocet® (oxycodone and acetaminophen), an opioid analgesic, is a Schedule II
controlled substance pursuant to Health and Safety Code section 11055, subdivision (b),
and a dangerous drug pursuant to Business and Professions Code section 4022. When
properly prescribed and indicated, it is used for the management of moderate to moderately
severe pain. The Drug Enforcement Administration has identified oxycodone, as a drug of
abuse. (Drugs of Abuse, A DEA Resource Guide (2011 Edition), at p. 41.) The Federal
Drug Administration has issued a black box warning for Percocet® which warns about,
among other things, addiction, abuse and misuse, and the possibility of "life-threatening
respiratory distress."

1 13. Respondent committed gross negligence in his care and treatment of Patient A,
2 which included, but was not limited to, the following:

3 (a) While prescribing controlled substances to Patient A, Respondent failed
4 to utilize and/or failed to document having utilized random urine toxicology tests.

5 **SECOND CAUSE FOR DISCIPLINE**

6 **(Repeated Negligent Acts)**

7 14. Respondent has further subjected his Physician's and Surgeon's Certificate No.
8 C 35020 to disciplinary action under sections 2227 and 2234, as defined by section 2234,
9 subdivision (c), of the Code, in that he committed repeated negligent acts in his care and
10 treatment of Patients A, B,¹³ C, and D as more particularly alleged herein.

11 (a) Paragraphs 8 through 13, above, are hereby incorporated by reference
12 and realleged as if fully set forth herein.

13 **Patient B**

14 15. Respondent began treating Patient B around April 2011.¹⁴ Patient B had a
15 history of pneumothorax,¹⁵ depression, melanoma,¹⁶ hypertension, and alcohol
16 dependence.

17 16. Between on or about August 18, 2012 through on or about December 2, 2013,
18 Respondent prescribed Norco¹⁷ to Patient A, on multiple occasions.

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20 ¹³ References to Patients A, B, C, and D are used in order to protect patient privacy.

21 ¹⁴ Conduct occurring more than seven (7) years from the filing date of this
22 Accusation is for informational purposes only and is not alleged as a basis for disciplinary
23 action.

23 ¹⁵ Pneumothorax refers to a collapsed lung.

24 ¹⁶ Melanoma refers to the most serious type of skin cancer.

25 ¹⁷ Hydrocodone APAP (Vicodin®, Lortab® and Norco®) is a hydrocodone
26 combination of hydrocodone bitartrate and acetaminophen which was formerly a Schedule
27 III controlled substance pursuant to Health and Safety Code section 11056, subdivision (e),
28 and a dangerous drug pursuant to Business and Professions Code section 4022. On August
22, 2014, the DEA published a final rule rescheduling hydrocodone combination products
(HCPs) to schedule II of the Controlled Substances Act, which became effective October 6,
2014. Schedule II controlled substances are substances that have a currently accepted

1 17. On or about July 26, 2011, Patient B presented to Respondent with neck pain,
2 claiming that he had stopped drinking alcohol "forever." Patient B's x-rays showed mild
3 grade 1 anterolisthesis¹⁸ at C3-4, mild disc height loss of C5-6, and moderate at C6-7, mild
4 neural foraminal narrowing¹⁹ in the mid and lower cervical spine, old right clavicle²⁰
5 fracture, and old posterior right rib fracture. Respondent initiated low dose hydrocodone
6 with acetaminophen and cyclobenzaprine.²¹

7 18. In December 2011, Patient B underwent a low anterior resection due to
8 recurrent symptoms of diverticulitis²² and a possible rupture.

9 19. In or around July 2013, Patient B's wife left for travel and Patient B resumed
10 drinking alcohol.

11 20. On or about August 23, 2013, Patient B presented to another physician and
12 surgeon with vomiting and alcoholism. Patient B was advised to taper his alcohol
13 consumption and was prescribed Ativan.²³

14 medical use in the United States, but also have a high potential for abuse, and the abuse of
15 which may lead to severe psychological or physical dependence. When properly
16 prescribed and indicated, it is used for the treatment of moderate to severe pain. In
17 addition to the potential for psychological and physical dependence there is also the risk of
18 acute liver failure which has resulted in a black box warning being issued by the Federal
19 Drug Administration (FDA). The FDA black box warning provides that "Acetaminophen
has been associated with cases of acute liver failure, at times resulting in liver transplant
and death. Most of the cases of liver injury are associated with use of the acetaminophen at
doses that exceed 4000 milligrams per day, and often involve more than one
acetaminophen containing product."

20 ¹⁸ Anterolisthesis is a spine condition in which the upper vertebral body, the drum-
shaped area in front of each vertebrae, slips forward onto the vertebra below.

21 ¹⁹ Foraminal (Stenosis) is the narrowing of the cervical disc space caused by
22 enlargement of a joint in the spinal canal.

23 ²⁰ Clavicle or collarbone is a long bone that serves as a strut between the shoulder
blade and the sternum or breastbone.

24 ²¹ Cyclobenzaprine is a muscle relaxant.

25 ²² Diverticulitis refers to an inflammation or infection in one or more small pouches
26 in the digestive tract.

27 ²³ Ativan® (lorazepam), a benzodiazepine, is a centrally acting hypnotic-sedative
28 that is a Schedule IV controlled substance pursuant to Health and Safety Code section
11057, subdivision (d), and a dangerous drug pursuant to Business and Professions Code

1 21. On or about August 25, 2013, Patient B presented to an urgent care center and
2 another physician and surgeon prescribed Librium²⁴ for alcohol withdrawal.

3 22. On or about September 3, 2013, Patient B presented to Respondent. Patient B
4 presented with anxious/fearful thoughts, depressed mood, difficulty concentrating,
5 diminished interest or pleasure, easily startled, fatigue, feelings of invulnerability, loss of
6 appetite, restlessness. According to Patient B, his depression was aggravated by alcohol
7 use and conflict or stress.

8 23. During the time Respondent prescribed controlled substances to Patient B,
9 noted above, Respondent failed to utilize and/or failed to document having utilized random
10 urine toxicology tests.

11 **Patient C**

12 24. Patient C first presented to Respondent in or around January 2002.²⁵ Patient
13 C's medical history included, but was not limited to, hypothyroidism,²⁶ breast cancer,
14 hypertension, chronic fatigue syndrome, back pain, transient ischemic²⁷ attack, pulmonary
15
16
17

18 section 4022. When properly prescribed and indicated, it is used for the management of
19 anxiety disorders or for the short term relief of anxiety or anxiety associated with
20 depressive symptoms. Concomitant use of Ativan® with opioids "may result in profound
21 sedation, respiratory depression, coma, and death." The Drug Enforcement Administration
(DEA) has identified benzodiazepines, such as Ativan®, as a drug of abuse. (Drugs of
Abuse, DEA Resource Guide (2011 Edition), at p. 53.)

22 ²⁴ Librium (Chlordiazepoxide) is a sedative, which can be used to treat anxiety,
alcohol withdrawal symptoms, and tremor.

23 ²⁵ Conduct occurring more than seven (7) years from the filing date of this
24 Accusation is for informational purposes only and is not alleged as a basis for disciplinary
action.

25 ²⁶ Hypothyroidism is a condition in which the thyroid gland is not able to produce
26 enough thyroid hormone.

27 ²⁷ Ischemia is a restriction in blood supply to tissues, causing a shortage of oxygen
28 that is needed for cellular metabolism.

1 fibrosis,²⁸ dyslipidemia,²⁹ osteoporosis,³⁰ fibromyalgia,³¹ partial hysterectomy,³² mild right
2 tibiofemoral compartment osteoarthritis,³³ posterior fusion T10-12 with T12
3 corpectomy,³⁴ and multiple sclerosis.

4 25. Between on or about July 30, 2012 through on or about June 20, 2016, on
5 multiple occasions, Respondent prescribed various controlled substances to Patient C;
6 including, but not limited to, hydrocodone-bitartrate-acetaminophen,³⁵ Lorazepam,³⁶ and

7 ²⁸ Pulmonary fibrosis is a lung disease that occurs when lung tissue becomes
8 damaged and scarred.

9 ²⁹ Dyslipidemia refers to abnormally elevated cholesterol or fats (lipids) in the
10 blood.

11 ³⁰ Osteoporosis is a condition in which bones become weak and brittle.

12 ³¹ Fibromyalgia is a disorder characterized by widespread musculoskeletal pain
13 accompanied by fatigue, sleep, memory and mood issues.

14 ³² Hysterectomy is an operation to remove a woman's uterus.

15 ³³ Osteoarthritis is a type of arthritis that occurs when flexible tissue at the ends of
16 bones wears down.

17 ³⁴ Corpectomy is a surgical procedure that involves removing all or part of the
18 vertebral body, usually as a way to decompress the spinal cord and nerves.

19 ³⁵ Hydrocodone APAP (Vicodin®, Lortab® and Norco®) is a hydrocodone
20 combination of hydrocodone bitartrate and acetaminophen which was formerly a Schedule
21 III controlled substance pursuant to Health and Safety Code section 11056, subdivision (e),
22 and a dangerous drug pursuant to Business and Professions Code section 4022. On August
23 22, 2014, the DEA published a final rule rescheduling hydrocodone combination products
24 (HCPs) to schedule II of the Controlled Substances Act, which became effective October 6,
25 2014. Schedule II controlled substances are substances that have a currently accepted
26 medical use in the United States, but also have a high potential for abuse, and the abuse of
27 which may lead to severe psychological or physical dependence. When properly
28 prescribed and indicated, it is used for the treatment of moderate to severe pain. In
addition to the potential for psychological and physical dependence there is also the risk of
acute liver failure which has resulted in a black box warning being issued by the Federal
Drug Administration (FDA). The FDA black box warning provides that "Acetaminophen
has been associated with cases of acute liver failure, at times resulting in liver transplant
and death. Most of the cases of liver injury are associated with use of the acetaminophen at
doses that exceed 4000 milligrams per day, and often involve more than one
acetaminophen containing product."

29 ³⁶ Ativan® (lorazepam), a benzodiazepine, is a centrally acting hypnotic-sedative
30 that is a Schedule IV controlled substance pursuant to Health and Safety Code section
31 11057, subdivision (d), and a dangerous drug pursuant to Business and Professions Code
32 section 4022. When properly prescribed and indicated, it is used for the management of
33 anxiety disorders or for the short term relief of anxiety or anxiety associated with

1 oxycodone hcl.³⁷

2 26. During the time Respondent prescribed controlled substances to Patient C,
3 noted above, Respondent failed to utilize and/or failed to document having utilized random
4 urine toxicology tests.

5 **Patient D**

6 27. Patient D first presented to Respondent in or around January 2010.³⁸ Patient D
7 was diagnosed with chronic pain syndrome, obstructive sleep apnea,³⁹ vitamin D
8 deficiency, colon polyps,⁴⁰ basal cell carcinoma⁴¹ at right mid-back and left infraorbital
9 rim, anxiety, hyperlipidemia,⁴² sinus congestion, bronchospasm,⁴³ restless leg syndrome,
10 ingrown toenail, and was a former smoker.

11
12 depressive symptoms. Concomitant use of Ativan® with opioids “may result in profound
13 sedation, respiratory depression, coma, and death.” The Drug Enforcement Administration
(DEA) has identified benzodiazepines, such as Ativan®, as a drug of abuse. (Drugs of
14 Abuse, DEA Resource Guide (2011 Edition), at p. 53.)

15 ³⁷ Oxycodone HCL (OxyContin®) is a Schedule II controlled substances pursuant
16 to Health and Safety Code section 11055, subdivision (b), and a dangerous drug pursuant
17 to Business and Professions Code section 4022. When properly prescribed and indicated,
18 Oxycodone HCL is used for the management of pain severe enough to require daily,
around-the-clock, long term opioid treatment for which alternative treatment options are
inadequate. The Drug Enforcement Administration (DEA) has identified oxycodone, as a
drug of abuse. (Drugs of Abuse, A DEA Resource Guide (2011 Edition), at p. 41.) The
risk of respiratory depression and overdose is increased with the concomitant use of
benzodiazepines or when prescribed to patients with pre-existing respiratory depression.

19 ³⁸ Conduct occurring more than seven (7) years from the filing date of this
20 Accusation is for informational purposes only and is not alleged as a basis for disciplinary
21 action.

22 ³⁹ Sleep apnea is a potentially serious sleep disorder in which breathing repeatedly
23 stops and starts.

24 ⁴⁰ Colon polyp is a small clump of cells that forms on the lining of the colon or
25 rectum.

26 ⁴¹ Basal cell carcinoma is a type of skin cancer that begins in the basal cells.

27 ⁴² Hyperlipidemia is a condition in which there are high levels of fat particles
(lipids) in the blood.

28 ⁴³ Bronchospasm is a sudden constriction of the muscles in the walls of the
bronchioles.

28. Between on or about February 25, 2014 through on or about May 2, 2016, Respondent prescribed various controlled substances to Patient D, including, but not limited to, hydrocodone bitartrate-acetaminophen,⁴⁴ alprazolam,⁴⁵ and acetaminophen-hydrocodone bitartrate.⁴⁶

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⁴⁴ Hydrocodone APAP (Vicodin®, Lortab® and Norco®) is a hydrocodone combination of hydrocodone bitartrate and acetaminophen which was formerly a Schedule III controlled substance pursuant to Health and Safety Code section 11056, subdivision (e), and a dangerous drug pursuant to Business and Professions Code section 4022. On August 22, 2014, the DEA published a final rule rescheduling hydrocodone combination products (HCPs) to schedule II of the Controlled Substances Act, which became effective October 6, 2014. Schedule II controlled substances are substances that have a currently accepted medical use in the United States, but also have a high potential for abuse, and the abuse of which may lead to severe psychological or physical dependence. When properly prescribed and indicated, it is used for the treatment of moderate to severe pain. In addition to the potential for psychological and physical dependence there is also the risk of acute liver failure which has resulted in a black box warning being issued by the Federal Drug Administration (FDA). The FDA black box warning provides that "Acetaminophen has been associated with cases of acute liver failure, at times resulting in liver transplant and death. Most of the cases of liver injury are associated with use of the acetaminophen at doses that exceed 4000 milligrams per day, and often involve more than one acetaminophen containing product."

⁴⁵ Xanax® (alprazolam), a benzodiazepine, is a centrally acting hypnotic-sedative that is a Schedule IV controlled substance pursuant to Health and Safety Code section 11057, subdivision (d), and a dangerous drug pursuant to Business and Professions Code section 4022. When properly prescribed and indicated, it is used for the management of anxiety disorders. Concomitant use of Xanax® with opioids "may result in profound sedation, respiratory depression, coma, and death." The Drug Enforcement Administration (DEA) has identified benzodiazepines, such as Xanax®, as a drug of abuse. (Drugs of Abuse, DEA Resource Guide (2011 Edition), at p. 53.)

⁴⁶ Hydrocodone APAP (Vicodin®, Lortab® and Norco®) is a hydrocodone combination of hydrocodone bitartrate and acetaminophen which was formerly a Schedule III controlled substance pursuant to Health and Safety Code section 11056, subdivision (e), and a dangerous drug pursuant to Business and Professions Code section 4022. On August 22, 2014, the DEA published a final rule rescheduling hydrocodone combination products (HCPs) to schedule II of the Controlled Substances Act, which became effective October 6, 2014. Schedule II controlled substances are substances that have a currently accepted medical use in the United States, but also have a high potential for abuse, and the abuse of which may lead to severe psychological or physical dependence. When properly prescribed and indicated, it is used for the treatment of moderate to severe pain. In addition to the potential for psychological and physical dependence there is also the risk of acute liver failure which has resulted in a black box warning being issued by the Federal Drug Administration (FDA). The FDA black box warning provides that "Acetaminophen has been associated with cases of acute liver failure, at times resulting in liver transplant and death. Most of the cases of liver injury are associated with use of the acetaminophen at doses that exceed 4000 milligrams per day, and often involve more than one acetaminophen containing product."

1 29. During the time Respondent prescribed controlled substances to Patient D,
2 noted above, Respondent failed to utilize and/or failed to document having utilized random
3 urine toxicology tests.

4 30. Respondent committed repeated negligent acts in his care and treatment of
5 Patients A, B, C, and D, which included, but were not limited to, the following:

6 (a) Paragraphs 8 through 27, above, are hereby incorporated by reference
7 and realleged as if fully set forth herein;

8 (b) During the time Respondent prescribed controlled substances to Patient A,
9 Respondent failed to utilize and/or failed to document having utilized random urine
10 toxicology tests;

11 (c) During the time Respondent prescribed controlled substances to Patient B,
12 Respondent failed to utilize and/or failed to document having utilized random urine
13 toxicology tests;

14 (d) During the time Respondent prescribed controlled substances to Patient C,
15 Respondent failed to utilize and/or failed to document having utilized random urine
16 toxicology tests; and

17 (e) During the time Respondent prescribed controlled substances to Patient D,
18 Respondent failed to utilize and/or failed to document having utilized random urine
19 toxicology tests.

20 **THIRD CAUSE FOR DISCIPLINE**

21 **(Failure to Maintain Adequate and Accurate Records)**

22 31. Respondent has further subjected his Physician's and Surgeon's Certificate No.
23 C 35020 to disciplinary action under sections 2227 and 2234, as defined by section 2266,
24 of the Code, in that Respondent failed to maintain adequate and accurate records regarding
25 his care and treatment of Patients A, B, C, and D, as more particularly alleged in
26 paragraphs 8 through 30, above, which are hereby incorporated by reference and realleged
27 as if fully set forth herein.

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1 **FOURTH CAUSE FOR DISCIPLINE**

2 **(General Unprofessional Conduct)**


3 32. Respondent has further subjected his Physician's and Surgeon's Certificate
4 No. C 35020 to disciplinary action under sections 2227 and 2234 of the Code, in that he
5 has engaged in conduct which breaches the rules or ethical code of the medical profession,
6 or conduct which is unbecoming to a member in good standing of the medical profession,
7 and which demonstrates an unfitness to practice medicine, as more particularly alleged in
8 paragraphs 8 through 31, above, which are hereby incorporated by reference as if fully set
9 forth herein.

10 **PRAYER**

11 WHEREFORE, Complainant requests that a hearing be held on the matters herein
12 alleged, and that following the hearing, the Medical Board of California issue a decision:

- 13 1. Revoking or suspending Physician's and Surgeon's Certificate Number C
14 35020, issued to Robert Paul Zgliniec, M.D.;
- 15 2. Revoking, suspending or denying approval of Robert Paul Zgliniec, M.D.'s
16 authority to supervise physician assistants and advanced practice nurses;
- 17 3. Ordering Robert Paul Zgliniec, M.D., if placed on probation, to pay the Board
18 the costs of probation monitoring; and
- 19 4. Taking such other and further action as deemed necessary and proper.

20
21 DATED: August 14, 2019
22 _____


23 KIMBERLY KIRCHMEYER
24 Executive Director
25 Medical Board of California
26 Department of Consumer Affairs
27 State of California
28 Complainant

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